PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number
11/10/14
10/0/00 7/08

Effective January 1, 2003								l	064		700	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL EN	NTITY	OR	OTHER SMALL	
TC	TAL CLAIMS	22	22			[RATE	FEE	1 [RATE	FEE	
FC	R		NUMBER FILED		NUMBER EXTRA		Ì	BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS 22 minu				ius 20=	* 2			X\$ 9=		OR	X\$18=	46
INDEPENDENT CLAIMS				nus 3 =	* -	>	Ī	X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							I	+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2							ı	TOTAL		OR	TOTAL	286
	С	LAIMS AS A (Column 1)	MENDED	(Column 2) (Column 3)				SMALL E	ENTITY	OR	OTHER SMALL	
IENT A		CLAIMS REMAINING AFTER AMENDMENT) ()) () () () () () () () ()	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus ***		CLAIM	=		X42=		OR	X84=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
							4	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)						
AMENDMENT B		CLAIMS REMAINING AFTER . AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	CLAINA	=		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							' [+140=		OR	+280=	
							L	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												•
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	1	X\$ 9=	,	OR	X\$18=	
	independent	*	Minus	***		=	1	X42=			X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLAIM		1	742-		OR	704=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
**	If the "Highest Nu 'If the "Highest Nu	mber Previously P Imber Previously P Inber Previously Pa	aid For" IN THI aid For" IN THI	S SPACE I	s less tha	un 20, enter "20." an 3. enter "3."		TOTAL DDIT. FEE and in the app	propriat bo		TOTAL ADDIT. FEE umn 1.	

FORM PTO-875 (Rev. 12/02)